

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:	De
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Statement of Committee Organization

1.	Statement Information 12/09/15 Date:				
	Type: New Amended (if amending, enter MEC ID	5184 & section ch	anged)		
2.					
	A09 North 15th Street, St. Louis, MO 63103		(314) 328-0849		
		St. Louis County	Telephone Number		
	Official Committee Email Address Committee Type: Campaign Candidate Continuing (County Clerk or Board of Election Commission PAC) Debt Service Expl			
3.					
	Treasurer's Name (First & Last)	reasurer's Email Address (optional)	570, 004, 0440		
	409 N 15th Street, St. Louis, MO 63117 Treasurer's Mailing Address, City, State, & Zip	(314) 325-5654 Treasurer's Home Telephone Number	(573) 301-8119 Treasurer's Work Telephone Number		
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)			
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number		
1.	Additional Committee Information				
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Address	ess, City, State, & Zip		
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, C	ity, State, & Zip		
;	CANDIDATES: Do you have more than one candidate committee Official Bank Account Information (required by all committees)	? Yes (refer to instructions on I	pack) No		
•	Official Bank Account mornation (required by air committees)		-		
	Candidate Supported or Opposed (candidate committees must	include self if candidate)			
•		()	()		
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees C	∩iy)		
7	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose		
	Ballot Measure Supported or Opposed (campaign committees n Metropolitan Sewer District Proposal	April 5, 2016	Support		
	Name of Ballot Measure Bond? TAX Inceusion Signature(s) Check certification(s) & sign (required by all comm	Election Date & Political Subdivision	Support or Oppose		
	I affirm and attest under penalty of perjury that information an	ete, true, and accurate. I			
	further acknowledge that I am aware that any false statement or				
	Committee Treasurer	Candidate (Candidate Committees Only)			

Form must be completed in full & contain original signature(s), falls again this accomplisation Page 1 of 3

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